Application for Hospital Project Mortgage Insurance

U.S. Department of Housing and Urban Development Office of Hospital Facilities

OMB Approval No. 2502-0602 (Exp. 08/31/2019)

Section 242

Part I Mortgagor's Appl	ication							
Mortgagor's Legal Name:					Project Number:			
Section A.		Date Prepared:						
To:					and t			Jrban Development.
The undersigned hereby applied	es for a loa	an in th	e princ	ipal amou				e insured under the
provisions of Section		the Nati	ional Ho	ousing Act,	said loan to be secu	ired by a firs	t mortgage on the	property
hereinafter described. Insurance								1 1 7
B. Project Background information	ation							
1. Street Address:						2. Munici	pality	
3. County 4. State		State	5. Zip Code:			6. No. of	7. Building Type:	8. Project Type
						Licensed Beds:	Multistory	New/Repl
		40 0	-:e . H E				One Story	Rehab
9. ☐ Non-Profit ☐ Gove ☐ For-Profit	ernmental	10. Spe	ecity the F	unding sourc	e:		11. Calendar Days	in constr. contract
C. Total Estimated Replaceme	nt Cost of	Projec	t		Legal , Organization	, Consultant,	AMPO, & Special As	sessments
Total Construction Cost P			\$		22. Legal			
Fees		` ,	•		00 0 : "			
Architect's Fee - Design	\$				23. Organization 24. Special Tax As	eecement		
3. Architect's Fee - Supervisory	· ·				25. Consultant			
Construction Mgmt. Fee					26. AMPO			
Other Fees (Identify)					27. Total Leg., Org.	Consult AM	PO & Spac Assas	
6. Total Fees (Lines 2-5)			\$		28. Total Soft Cos			
Other			Ψ		29. Total Estimated Project Cost (Lines 11 & 28)			
	•							
7. Contingency	\$				30. Existing Land 8		,	
8. Other (Identify)					31. Land & PP&E 1	•	•	
9. Total Other (Lines 7-8)			\$		32. Total Estimated Replacement Cost of Project (lines 29,30, & 31)			
10. Equipment and Furnishings			\$		D. Estimated Cash Requirements – Sources and Uses			
11. Total Hard Costs (Lines 1,6,9,	& 10)		\$		Total Estimated Project Cost (from C.29)			
Carrying Charges and Financing					Refinanced C	apital Debt		
12. Interest: mos. @ %					3. Purchase Pric	ce of Property	to be Acquired	
On \$	\$				4. Total Project Uses (Lines D1 through D3)			
13. Taxes					Other Funding Req. (Identify)			
14. Insurance					6. Other Funding	Req. (Identify	')	
15. HUD Mtge. Ins. Prem.				7. Total Uses of Funds (Lines D4 through D6)				
16. HUD Exam. Fee 0.3 %					8. Less Insured I	oan amount		
17. HUD Inspection Fee					Less Grant or	Approved Loa	ns (if any)	
18. Permanent Financing Fee%					10. Less Other FHA Cash Requirements			
19. Initial Service Charge%					11. Cash Equity			
20. Title and Recording					12. Total Estimat		-	
21. Total Carrying Charges and Financing (Lines 12 through 20)			\$		E. 1. Information on Leased Property (based on inspection of Title Policy) Is any of the property to be mortgaged held pursuant			
For HUD Use 0	Only				to a ground lease	?	, ,	•
Amount of Application Fee Received			P termination cost on line D(2)			_		irs
			` '		2. Non-FHA cash	If so, Value?		<u> </u>
Received by					Z. NUII-FHA CASII	requiremen	ito.	
					H			

F. Sponsors	Name of Sponsor or Co-Sponsor:		Telephone Number:								
	Address:										
	Name of Sponsor or Co-Sponsor:		Telephone Number:								
	Address:										
	Relationship between Sponsoring Group and Mortgagor (Ex	disting Connections or Proposed, if Mortgagor has not	been formed).								
	on The undersigned, as the principal sponsor(s) of the										
	f the regulations of the Secretary of Housing and Urban last of his/her (their) knowledge and belief the mortgagor	_									
	erequisite to insurance of the mortgage under such Section		in an of the requirements thereof								
-	by represented by the undersigned that to the best of his/he		or data contained herein or attachment								
	are in any way false or incorrect and that they are truly de		ntended as the security for the propose								
mortgage and	d that the proposed construction will not violate zoning of	rdinances or deed restrictions.									
Attest:		Date:									
Signature: (Spon	sor)	Date:									
Part II - Mortga	agee's Application										
Γο: The Secretar	y of Housing and Urban Development:										
application is happlication and	e provisions of the Section of the National Housing Act ide nereby made for the insurance of a mortgage covering prop d the proposed security, the undersigned proposed mortgag unt of	perty described in the above application of the	Mortgagor. After examination of the								
(\$), which will bear interest at	percent (
over a period o	ofmonths and, according to an a ot desired.	mortization plan to be agreed upon. Insurance	ce of advances during construction								
This application	on by the undersigned proposed Mortgagee is subject to yo	our commitment, its own final action and the	payment of its charges. It is understood								
	service charge in the amount of	the total will not exceed	Dollars								
(\$		the total will not exceed	percent (%)								
	of your commitment. rmanent Financing Fee for the mortgage is %.										
Herewith is che			Dollars								
(\$		oplication fee required by said HUD Regulati									
Mortgagee:		Signature:									
Address:		Name & Title of Officer:									
_	_										
☐ Original	Certificate of Need Attached Original Certification	ate of Need Previously Furnished 🗌 Ce	ertificate of Need Not Required								
To Be Complete	ed by Each Sponsor and by the General Contractor										

Public reporting burden for this collection of information is estimated to average 4,664 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Applicants are required to complete this form to provide HUD with the necessary data to determine a hospital's eligibility for FHA insurance. HUD will use the information to determine that the applicant meets the requirements and eligibility criteria; underwriting standards; and adequacy of state/or local certifications, approval, or waivers. This collection of information is authorized by Section 242, Sections 223(a)(7), 223(e), 223(f), and 241(a) of 12 U.S.C. 1715z-7. This collection is required to obtain benefits.

Privacy Act Notice. The United States Department of Housing and Urban Development, Federal Housing Administration, is authorized to solicit the information requested in this form by virtue of Title 12, United States Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. While no assurance of confidentiality is pledged to respondents, HUD generally discloses this data only in response to a Freedom of Information request. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.